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**A Process to Determine the Appropriate Organizational
Design for
The Division of Compliance and Enforcement**

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**Project Paper
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Introduction

The South Carolina Department of Health and Environmental Control (SCDHEC), along with most state agencies, is losing a number of experienced management and staff through retirement and resignation. When the Teacher and Employee Retention Incentive (TERI) became available to eligible State employees five years ago, a significant number of SCDHEC management and staff took advantage of the opportunity. The TERI Program is "...designed for employees who retire from the South Carolina Retirement Systems, but want to continue employment with the agency and retain the same positions they held prior to entering the program."¹ With the departure of a number of management and staff and a continual decline in financial resources, it is necessary for agencies to establish a process to recruit, develop, and retain a skilled and motivated workforce. A significant factor in the process is ensuring that the organizational design and structure create an environment to maximize performance of functions and services; capitalize on existing skill sets within the organization; and, encourage professional development for management and staff.

Agency Background

SCDHEC was established in 1973 with the merger of the State Board of Health and the Pollution Control Authority. The mission of the Agency, as laid out in a Strategic Plan, is to "*promote and protect the health of the public and the environment.*"² To achieve its mission, SCDHEC has seven values as guiding principles: "*...customer service, excellence in government, applied scientific knowledge for decision making, local solutions to local problems, teamwork, cultural competence, and our employees.*"² The Agency's vision is "*healthy people living in healthy communities.*"²

SCDHEC is “charged with the protection of public health and the environment.”² In order to best serve and protect its customers, SCDHEC is divided into four broad areas:

“Health Services (HS) includes activities to prevent chronic and infectious diseases; promote families; improve and assure environmental health; encourage the reduction of health disparities; and, support seniors with in-home health care needs.

Health Regulations (HR) oversees the development of the State Health Plan; licenses, certifies and inspects health care facilities; and, oversees entities that provide emergency medical services in the state.

Ocean and Coastal Resource Management (OCRM) enforces laws to protect coastal resources and promote responsible development through permitting and certification programs in the eight coastal counties.

Environmental Quality Control (EQC) enforces federal and state environmental laws and regulations; responds to environmental emergencies; and, conducts environmental education and outreach activities.”³

While each broad area has specific responsibilities, the overall mission of the Agency can best be achieved through interdependent relationships that create a holistic approach to protecting human health and the environment. SCDHEC has several inter-area committees and work groups that develop strategies to address related health and environmental concerns. For example, “In South Carolina, asthma is the leading cause of children’s hospitalizations missed school days.”³ To address this critical issue, in 1999, SCDHEC established the SC Asthma Alliance (Alliance) to create inter- and intra-agency partnerships designed to educate the public on effective management tools for asthma and other chronic lung diseases. Dust, pet dander and mold as well as outdoor ground level ozone are triggers of asthma that have been discussed in Alliance meetings

and presentations. Many people would not normally associate ground level ozone as a trigger of asthma. Providing the public with effective educational programs enables affected persons to make better decisions about their everyday life activities and routines.

SCDHEC has outlined the process to achieve its mission through its Strategic Plan, which has seven long-term goals designed to improve the quality of health and the environment in the State of South Carolina. The first six (6) goals identify specific strategies to address health and environmental needs. Goal 5 is to "*Improve organizational capacity and quality.*"² It is important for Departmental areas to operate in tandem both internally and externally to ensure maximum service to customers.

Bureau Background

As the environmental regulatory arm for the State, EQC is responsible for ensuring compliance with state and federal laws and regulations. EQC is composed of four major program areas; the Bureau of Air Quality, the Bureau of Water, the Bureau of Environmental Services, and the Bureau of Land and Waste Management.

The Bureau of Land and Waste Management (BLWM) consists of seven divisions: Compliance and Enforcement; Hydrogeology; Mining and Solid Waste Management; Site Assessment and Remediation; Underground Storage Tanks; Waste Assessment, and Emergency Response; and, Waste Management.

A new Bureau Chief for the BLWM was appointed in March of 2005. A new Director was selected for the Division of Compliance and Enforcement (the Division) in the BLWM in December of 2005. The previous Bureau Chief and Division Director took advantage of an early retirement buy-out opportunity in December of 2004. Two units from other divisions in the BLWM were assigned to the Division of Compliance and Enforcement in early 2005. All of the above presented a unique opportunity to review the organizational structure of the Division, identify opportunities to facilitate system-wide thinking on issues, and maximize program coordination.

Division Structure and Functions

The Division of Compliance and Enforcement is responsible for ensuring that applicable entities maintain compliance with the requirements of several state statutes including, but not limited to: the Solid Waste Policy and Management Act; the Hazardous Waste Management Act; the Infectious Waste Management Act; the Mining Act; the State Underground Petroleum Environmental Response Bank Act (SUPERB); and the Radioactive Waste Transportation and Disposal Act. As an authorized state, South Carolina implements the federal Resource Conservation and Recovery Act, SUPERB, and the Radioactive Waste Transportation and Disposal Act in lieu of federal counterparts. As the recipient of grant funding to assist with operating these programs, the Division provides data to federal counterparts documenting compliance and enforcement efforts to encourage compliance and deter non-compliance. EQC has committed to a Strategic Enforcement approach that provides in-depth compliance assistance to regulated entities. If there are entities that choose to be out of compliance or have severe environmental circumstances that require a stronger approach, enforcement actions are initiated to obtain compliance. The Division's Compliance and Enforcement program incorporates those strategies as part of its program implementation.

The Division is currently divided into two sections and one unit: the Solid Waste Compliance and Enforcement Section; the Hazardous Waste Compliance and Enforcement Section; and, the Underground Storage Tank (UST) Enforcement Unit. The Solid Waste Compliance Unit was moved from the Mining and Solid Waste Management Division into the Solid Waste Enforcement Section in the spring of 2005. The UST Enforcement Unit was moved from the UST Compliance Division into the Division in October of 2005. The Unit Manager for the UST Enforcement Unit retired February 1, 2006. There are currently several vacancies in the Division. See Appendix 1.

Project Purpose

The purpose of this project is to develop a process to evaluate the Division's existing organizational functions and its capacity to perform those functions, as well as to review the current organizational design to determine if the structure allows for maximal performance of functions and services and provides opportunities for management and staff professional development. The process will be developed based on the Agency's mission, vision and values and the strategies and objectives identified in Goal 5 of the Agency Strategic Plan. See Appendix 2.

Organizational Systems

Traditionally, organizations have evaluated effectiveness using a compartmentalized process of looking at each department and implementing modifications to make that department more effective. Usually, there is little or no consideration of whether the revisions impact the ability of departments to integrate well with each other to provide quality service. One of SCDHEC's values is use of applied scientific knowledge for decision-making. Synergy is a scientific process where organisms are studied using a systems approach. The systems approach involves studying a collection of subsystems and how their interaction contributes to the overall function of an organism. In the corporate world, synergy may be defined as a "cooperative interaction among groups that creates an enhanced combined effect."⁴

Carter McNamara writes, "Systems have inputs, processes, outputs and outcomes, with ongoing feedback among these various parts. If one part of the system is removed, the nature of the system is changed."⁵ For example, reassigning units to a different division changed the nature of the affected Divisions' systems as well as the Bureau. With a change in leadership, differences in personality, priorities, goals, and management styles can also change the "nature of the system."

Management changes can also result in changes in the culture of an organization. "Culture is comprised of the assumptions, values, norms, and tangible signs of organization members and their behaviors."⁵ Areas within large corporate organizations tend to develop subcultures that vary slightly from the overall corporate culture. Carter McNamara suggests that corporate cultures are systems that are "particularly important when attempting to manage organization-wide change."⁵ He further suggests, "Organizational change must include not only changing structures and processes, but also changing the corporate culture as well."⁵ If the new leadership supports a different culture than the current culture, again, the nature of the system would change.

For purposes of this project, specific attention will be placed on the Bureau and Division's subsystems and cultures. A Division-wide retreat will be planned to outline why there is a need to go through this process and outline what will occur over the next few months. Training will be provided on the Continuous Improvement Process, the SCDHEC Strategic Plan, and the EQC Operational Planning process and the Process Implementation Plan (See Appendix 3). The four phases of the Continuous Improvement Process will be the foundation strategy for each step in the process: "**Plan** to solve the problem or opportunity; **Do** data gathering and determine the facts and causes; **Check** for solutions and prepare an action plan; and, **Act** on the plan to address challenges."⁶

Know the People

Jim Collins' guiding principles in the book *Good to Great* will also be used as a reference to develop the steps. According to Collins, "the 'who' questions come before 'what' decisions, - before vision, before strategy, before organizational structure, before tactics."⁷ Developing a knowledge base of the people in the Division will be the first step. The Division Director will conduct interviews with managers and staff to do an assessment of skills, goals and interests. Strategies to accomplish this will include reviewing past performance appraisals as well as discussions with managers and co-workers both internal and external to the Division. Initiating the process with this step

creates an opportunity to get to know managers and staff and to build a foundation of trust. It will also be helpful when it is time to match people with positions.

Identify the Functions

According to Draper L. Kaufman, Jr., there are several principles that govern systems: "The system's overall behavior depends on its entire structure (not the sum of its various parts); there is an optimum size for a system; and, a circular relationship exists between the overall system and its parts."⁵ Structure dictates certain behaviors that produce specific results. If a subsystem is structured to produce reactionary approaches to issues, planning is probably non-existent. The strategic enforcement process involves specific steps to return violators to compliance. It is structured to create layers of objective review and decision-making to ensure appropriate actions are taken to return violators to compliance. This reduces the likelihood for personality or other issues to cloud the process and further ensures consistency in the overall process. By nature, the systems approach encourages a global response to issues rather than a reactionary one to events.

The next step in the process is to identify functions. It is important to know the functions of the Division in order to determine its design. The managers and staff will be asked to outline expectations, current functions, roles, and responsibilities of all areas within the Division, and how those responsibilities interact with intra- and inter-Division areas as well as other program areas and the public. It is vital that a commitment be made to create an environment where people feel "safe" sharing views and opinions in order to receive accurate and useful information. It may be necessary to secure the services of Quality Management to facilitate this step. Managers and select staff will be assigned the responsibility of interviewing counterparts in other program areas internal and external to EQC, the Agency and the State.

Detailed questions will be developed for the Division Director to initiate discussions with the Division Directors for UST Compliance and Mining and Solid Waste Management to obtain their views concerning how compliance and/or enforcement activities interact with

their areas of responsibility and the best methods to maintain effective communication and positive working relationships. Once the functions are identified, a determination can be made of the positions needed to perform those functions.

Subsystems Analysis

The subsystems review will be followed by an analysis of the current structure, and will include: evaluating the current physical location of personnel and the impact on communication, coordination and customer service; a review of positions associated with functions; identify the Division's internal and external customers; and, determining the Division's culture and subculture. Focus groups will meet with a facilitator as part of this process. The groups will include a limited number of persons and external to the Division. In addition, managers and select staff will interview counterparts in other Agency areas that are responsible for compliance and enforcement activities and conduct a comparison with functions and structures.

Division Mission, Vision, Values

Once there is a level of understanding of the people and the functions, the next step will be to determine if revisions of the Division's current mission, vision, goals, strategies and objectives are required due to the addition of UST Enforcement and Solid Waste Compliance. A clear understanding of each is necessary to maintain focus and direction. In addition, each member of the Division must be able to articulate his/her role in achieving the mission, vision, goals, strategies and objectives.

Creating an Atmosphere for Change

It would be naïve to believe no changes would be needed to the current structure. There are several methods to initiating change. Creating an uncomfortable atmosphere can facilitate adjustments to change. Moving away from tradition, a crisis, and strategic decisions all help create an uncomfortable atmosphere. Discussions will be held with the

Office of Quality Management and the EQC Personnel Coordinator to identify a “change agent” to facilitate this process.

Leadership Roles

The Division Director is responsible for demonstrating the need for change by articulating the vision and how the change will help actualize the vision as well as outlining the long-term strategy to achieve the vision. The Director, in consultation with appropriate persons, will be responsible for studying the current conditions, assessing readiness for the changes, creating a model of the changes, announcing the changes, highlighting the goals for the Division and then, assigning responsibilities and resources to help make the changes occur.

The force field analysis approach will be used as the evaluation instrument to determine the need for change. Identification of driving forces and restraining forces of change followed by determining if the driving forces can be strengthened and the restraining forces eliminated, mitigated and/or counteracted will all be used to justify the need for change or maintaining the current structure. The following questions will be incorporated into the discussions:

Would the reorganization make the programs more effective?

Would the public receive better services as a result of the reorganization?

Are there measurable outcomes for services provided by the programs?

In the current and new structures, who is responsible for the outcomes?

Will the new structure provide for effective management?

Does the current structure exhibit duplication of efforts or lack of coordination?

Would the reorganization improve the use of limited resources?

Is reorganization the best approach to addressing identified issues?

Could improved leadership, changes in policy, better coordination or other solutions provide a better result?

Bureau upper management, Division managers and staff will be involved in the force field analysis process. Involving affected persons provides a tremendous knowledge resource and promotes commitment, ownership and buy in. The opportunity for open discussion with management supports participatory management and can create an atmosphere for discussion of concerns.

A significant factor will be matching people with positions. In the book *Good to Great*, Jim Collins interviewed Chief Executive Officers of several “great” companies. He came to the conclusion that “getting the right people on the bus”⁵ is essential to building a great company. Collins emphasized, “Those who build great companies understand that the ultimate throttle on growth for any great company is not markets, or technology, or competition, or products. It is one thing above all others: the ability to get and keep enough of the right people.”⁵

Getting and keeping the “right people on the bus” can be a tremendous challenge in state government. Government positions in general have a long-term reputation for being reduced stress jobs requiring few skills, with great benefits and job security. Persons outside of government positions often have the perception that people who work in government jobs don’t want to work, but need a check; couldn’t get a “real” job; or, need job security. Because government positions are primarily funded with public dollars, members of the public also feel they have a right to expect maximum service for minimum investment. Most government employees are intelligent, dedicated, caring people with the gift of wanting to serve others. Like any organization, there are those who fall outside of this description.

Inadequate salaries and “public floggings” can discourage persons from entering or remaining in government positions. Since most government positions are service based, managers have a “service mentality” and are reluctant to “give up” on inadequate people

and termination of poor performers involves a tedious process. Lack of adequate funding can prevent agencies from investing the necessary resources to get and keep all the “right people on the bus.” Unfortunately, when managers identify less than stellar employees who require micro-management, everyone suffers. Collins states “The moment you feel the need to tightly manage someone, you’ve made a hiring mistake. The best people don’t need to be managed. Guided, taught, led – yes. But not tightly managed. We have all experienced having the wrong person on the bus and we know it. Yet we wait, we delay, we try alternatives, we give a third and fourth chance, we hope that the situation will improve, we invest time in trying to properly manage the person, we build little systems to compensate for his shortcomings, and so forth.... Worse, all the time and energy we spend on that one person siphons energy away from developing and working with all the right people. We continue to stumble along until the person leaves on his own or we finally act. Meanwhile, our best people wonder, ‘What took you so long?’ Letting the wrong people hang around is unfair to all the right people, as they inevitably find themselves compensating for the inadequacies of the wrong people. Worse, it can drive away the best people. Strong performers are intrinsically motivated by performance, and when they see their efforts impeded by carrying extra weight, they eventually become frustrated.”⁵

It is not always a case of the wrong “people on the bus.” Sometimes people are in the “wrong seat on the bus.”⁵ According to Collins, great leaders “...invested substantial effort in determining whether they had someone in the wrong seat before concluding that they had the wrong person on the bus entirely.”⁵ Often, people are hired into a specific position and are later found to be inadequate for that position. It may not mean the person is not a quality employee; he/she may not be the quality employee for that position.

An important goal is to get the right people in the right seats. As Collins suggests, a major key to getting from good to great is to “put your best people on your biggest opportunities, not your biggest problems. Whether someone is the ‘right person’ has more to do with character traits and innate capabilities than with specific knowledge,

background or skills.” Taking time to develop an understanding of managers and staff is essential to getting the “right people in the right seats.” Change can be difficult and care must be taken to emphasize that changes are to build opportunities, not demote or destroy careers. This can best be achieved if a foundation of trust and respect has been built between the leaders, managers and staff.

Initiating the Change

Change is difficult and there will always be at least some resistance to change. Getting to know the people involved in the change allows the change initiators to better plan for the change. The Group Effectiveness Model developed by J. Richard Hackman will be used as a structural guide as well as other resources received during Certified Public Manager Program sessions.

Professional Development

Once the right people are in the right seats on the bus, every effort must be made to retain and maintain a high quality group of management and staff. Although limited resources often prevent offering financial rewards for top quality performance, SCDHEC and particularly EQC maintain a commitment to recruiting, training and retaining a quality workforce of highly skilled motivated staff.

In 2004, SCDHEC modified the employee appraisal program. The Employee Performance and Development Plan (EPDP) is a “participative and collaborative process for:

- Reviewing employee’s past performances;
- Establishing future performance expectations;
- Determining training/development needs; and,
- Identifying other organizational support that the employee may need.”⁸

The Board for SCDHEC approved the 2005-2010 Strategic Plan in August of 2005. The current plan is an update of the previous plan with the addition of a value “our employees.”⁹

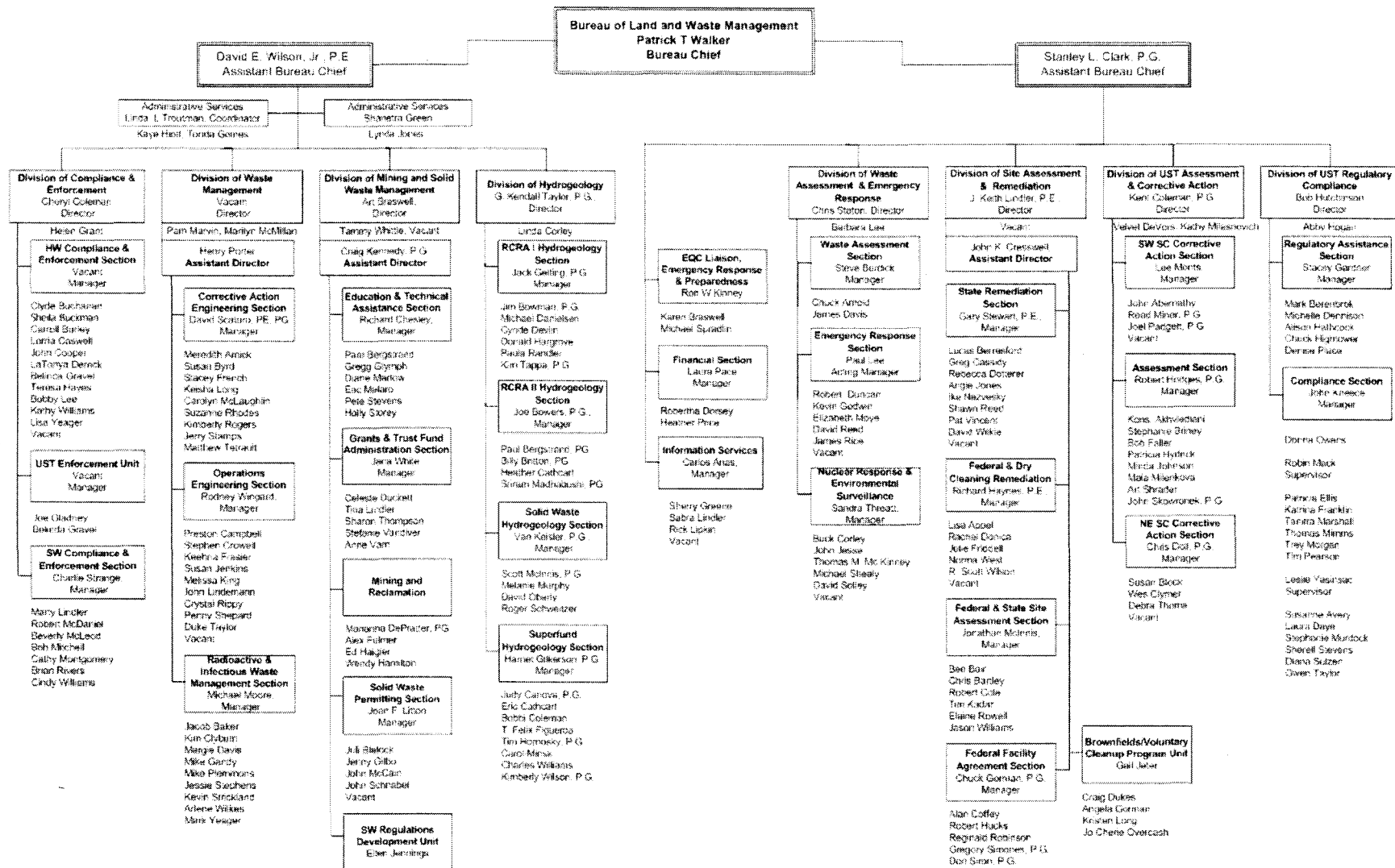
EQC initiated the Capacity Building Program in 2002 as part of its “continuing efforts to facilitate staff development and to improve the overall knowledge/experience of as many staff as possible.”

The Division Director shares the Agency’s commitment to employees and will utilize the EPDP and Capacity Building Program to assist managers and staff in creating a Professional Development Profile. The goal is to: define a baseline of critical criteria for each position; identify behaviors and practices for effective technical and/or leadership development; provide access to training and development programs targeted to individual and group level competencies; and, provide opportunities for continual feedback that includes understanding how each staff member’s approach to his/her responsibilities contributes to the success of the Division.

Finally, quantifiable measures of the changes, including reassessments of individuals, subsystems, and organizational capabilities will be included as part of the Continuous Quality Improvement process to determine if there is a need to realign efforts and identify requirements for future success.

Resources

1. www.ohr.sc.gov/OHR/employer/OHR-teri.phtm Office of Human Resources – TERI Program p.1
2. South Carolina Department of Health and Environmental Control , SCDHEC Strategic Plan, p.4-5
3. South Carolina Department of Health and Environmental Control Annual Accountability Report, fiscal year 2005, p. 14.
4. Dictionary.com
5. http://www.managementhelp.org/org_thry/org_sytm.htm
6. South Carolina Certified Public Manager Program: Team Leadership Session, Budget and Control Board, p. 35
7. Jim Collins, *Good to Great* (New York: HarperCollins Publishers Inc., 2001), 50-54
8. South Carolina Department of Health and Environmental Control; SCDHEC.net, Personnel Services - EPDP
9. South Carolina Department of Health and Environmental Control; SCDHEC.net, EQC – Capacity Building



DHEC Strategic Plan 2005-2010

Goal 1: Increase support to and involvement by communities in developing healthy and environmentally sound communities.

Strategic Goal 1-A: Increase support to develop healthy communities.

Objective 1-A-1: Assist communities in developing community-based health improvement plans.

Objective 1-A-2: Build the capacity of DHEC and community staff at the local level to retrieve, analyze and present data.

Objective 1-A-3: Improve partnerships with other state agencies to better impact the public's health and the environment.

Objective 1-A-4: Support the development and funding of a statewide trauma system.

Strategic Goal 1-B: Protect the public against food-, water- and vector-borne diseases.

Objective 1-B-1: Map the location of septic tanks and wells statewide.

Objective 1-B-2: Work with local governments to improve maintenance of septic tanks.

Objective 1-B-3: Reduce food-borne disease outbreaks.

Objective 1-B-4: Reduce the impact of vector-borne diseases and potential rabies exposures.

Objective 1-B-5: Protect public drinking water.

Strategic Goal 1-C: Promote a coordinated, comprehensive public health preparedness and response system for natural or man-made disasters or terrorist events.

Objective 1-C-1: Develop a Public Health Emergency Management Plan and procedures integrated into the state Emergency Operations Plans and State Homeland Security Strategy.

Objective 1-C-2: Provide necessary equipment to staff and community partners to enable safe responses.

Objective 1-C-3: Create response teams in each region and at the state level with training, awareness and operation levels to handle emergencies.

Objective 1-C-4: Improve public health capabilities to detect, prevent and respond to natural disasters, technological disasters or acts of terrorism.

Strategic Goal 1-D: Work with local governments and communities to improve land use plans to balance growth and natural resource protection.

Objective 1-D-1: Partner with local governments and communities to encourage and improve land use planning and natural resource protection.

Objective 1-D-2: Increase agency participation in efforts to address broad statewide and regional natural resource protection and land use planning.

Strategic Goal 1-E: Expand public knowledge of and involvement in environmental and health issues.

Objective 1-E-1: Increase public awareness through health and environmental education, publications, presentations and the DHEC Web site.

Objective 1-E-2: Encourage public participation in DHEC activities whenever appropriate.

Goal 2: Improve the quality and years of healthy life for all.

Strategic Goal 2-A: Promote healthy behaviors.

Objective 2-A-1: Develop effective state and local partnerships to promote healthy behaviors including good nutrition, physical activity and tobacco use cessation.

Objective 2-A-2: Provide best practices, consultation and training regarding risk reduction/health promotion programs and policies.

Objective 2-A-3: Implement interventions to prevent tobacco use, promote cessation and reduce exposure to secondhand smoke.

Objective 2-A-4: Collaborate with public and private partners to develop and implement statewide prevention plans targeting diabetes, cardiovascular health, cancer, injury, tobacco, obesity or associated risk factors.

Objective 2-A-5: Provide education and information to providers on the importance of prevention and early detection of major cancers.

Objective 2-A-6: Develop and implement a model employee-focused wellness program at DHEC.

Strategic Goal 2-B: Reduce the occurrence of vaccine preventable diseases.

Objective 2-B-1: Maintain and improve immunization rates among children age 19 to 35 months.

Objective 2-B-2: Improve influenza and pneumococcal vaccination coverages among adults 65 years and older, and decrease the coverage disparity between white and minority seniors.

Objective 2-B-3: Develop and implement an Immunization Registry.

Objective 2-B-4: Increase the percent of public vaccine provider assessments of immunization levels within the past two years.

Objective 2-B-5: Identify and secure resources to support the implementation of recommended vaccines.

Strategic Goal 2-C: Improve maternal and child health.

Objective 2-C-1: Increase the percent of newborns receiving a newborn home visit.

Objective 2-C-2: Risk assess and refer appropriately all pregnant women who are public health department clients.

Objective 2-C-3: Review all infant deaths and unexplained or unexpected child deaths.

Objective 2-C-4: Increase the percent of the targeted population who receive Women, Infants and Children (WIC) nutrition services.

Objective 2-C-5: Increase the percent of infants who are breastfed.

Objective 2-C-6: Increase the percent of newborn children who receive screenings and follow-up for hearing impairment, inborn errors of metabolism and hemoglobinopathies.

Objective 2-C-7: Identify, secure resources and implement a statewide initiative that addresses asthma incidence.

Objective 2-C-8: Improve reproductive health services to women and men in need.

Strategic Goal 2-D: Improve the quality of life for seniors living at home and in long-term care facilities.

Objective 2-D-1: Raise awareness among seniors, family caregivers and providers of elder care on ways to reduce injuries to seniors due to falls.

Objective 2-D-2: Maintain access to home health services.

Objective 2-D-3: Collaborate with public and private partners to promote healthy aging.

Strategic Goal 2-E: Improve access to comprehensive, high quality care.

Objective 2-E-1: Increase the number of medical home partnerships for pregnant women, children and children with special health care needs.

Objective 2-E-2: Improve the effectiveness of the BabyNet program.

Objective 2-E-3: Expand the breast and cervical cancer treatment programs.

Objective 2-E-4: Improve the quality of emergency medical services throughout South Carolina, particularly in rural and underserved areas.

Objective 2-E-5: Increase the percent of federally qualified and rural health care centers that have integrated "Clinical Preventative Services" into their daily practices.

Goal 3: Eliminate health disparities.

Strategic Goal 3-A: Reduce disparities in the incidence and the impact of communicable diseases.

Objective 3-A-1: Increase the number of community-based, minority serving organizations that are implementing strategies to address HIV.

Objective 3-A-2: Strengthen the capacity of community-based organizations and local public health departments to implement and evaluate effective STD/HIV prevention and care programs.

Objective 3-A-3: Increase the proportion of minority HIV infected and high-risk persons receiving appropriate prevention, referral and care/treatment services.

Objective 3-A-4: Decrease the incidence of perinatal HIV transmission.

Objective 3-A-5: Eliminate syphilis among South Carolina residents.

Objective 3-A-6: Decrease the prevalence of chlamydia and gonorrhea.

Objective 3-A-7: Increase the percent of patients with newly diagnosed tuberculosis who complete therapy within 12 months.

Strategic Goal 3-B: Reduce disparities in illness, disability and premature deaths from chronic diseases.

Objective 3-B-1: Increase the number of minorities with diabetes who receive recommended diabetes care (eye exams, foot exams, flu/pneumonia immunizations and A1c tests).

Objective 3-B-2: Increase the percent of high-risk minorities who receive diabetes information and/or diabetes self-management education.

Objective 3-B-3: Develop and implement a social marketing-based educational program targeting African American men that increases their awareness about the need for prostate screening.

Objective 3-B-4: Increase the percent of minority women screened through the Best Chance Network program.

Objective 3-B-5: Increase the number of minorities at-risk for heart attacks and stroke who are receiving education interventions.

Objective 3-B-6: Develop and implement community- and faith-based initiatives to address health disparities.

Goal 4: Protect, enhance and sustain environmental and coastal resources.

Strategic Goal 4-A: Protect the environment to improve public health and safety.

Objective 4-A-1: Collect data to assess and characterize environmental conditions.

Objective 4-A-2: Increase areas in South Carolina where environmental standards for air, water, and land and waste management are met.

Objective 4-A-3: Reduce non-compliance of regulated activities and facilities to meet applicable protective standards.

Objective 4-A-4: Minimize the impact to public health and the environment from environmental emergencies, disasters and spills.

Objective 4-A-5: Reduce exposure to contaminants.

Strategic Goal 4-B: Enhance environmental and coastal resources.

Objective 4-B-1: Promote improvement in environmental quality beyond current regulatory standards.

Objective 4-B-2: Reduce the amount of waste generated.

Objective 4-B-3: Attain healthy and publicly accessible beaches.

Strategic Goal 4C: Restore impaired natural resources and sustain them for beneficial use.

Objective 4-C-1: Clean and restore Brownfields and other contaminated sites for beneficial uses.

Objective 4-C-2: Reduce direct and indirect loadings of pollutants to surface waters and groundwaters.

Strategic Goal 4-D: Protect coastal and other sensitive areas.

Objective 4-D-1: Protect sensitive and fragile areas against impacts from encroaching development and restore and/or enhance these areas as opportunities are presented.

Objective 4-D-2: Coordinate with the research community to better direct research toward identified environmental management needs.

Objective 4-D-3: Improve, in conjunction with other partners, education through outreach to the community, developers, local officials and the public.

Goal 5: Improve organizational capacity and quality.

Strategic Goal 5-A: Provide continuous development of a competent and diverse workforce.

Objective 5-A-1: Develop and implement a workforce plan in each deputy area that identifies areas of critical need, gaps, core competencies and training needs.

Objective 5-A-2: Provide adequate workforce capacity building and knowledge transfer.

Objective 5-A-3: Implement an agency learning management system to automate the administration of training plans and events for all public health workers, health care providers and community response partners.

Objective 5-A-4: Ensure that agency managers are using available and appropriate incentives to reward and recognize deserving employees.

Objective 5-A-5: Improve agency recruitment strategies to increase the pool of qualified applicants.

Strategic Goal 5-B: Provide reliable, valid and timely information for internal and external decision-making.

Objective 5-B-1: Improve standards across the agency for collecting, processing and distributing data.

Objective 5-B-2: Continue to develop Public Health Informatics infrastructure to improve data and system integration.

Objective 5-B-3: Develop and maintain a management scorecard of measures to monitor agency progress on strategic plan goals and objectives.

Objective 5-B-4: Improve and increase public health and environmental information available to the public through the agency Web site.

Objective 5-B-5: Complete DHEC's core data system integration of SC Vital Records and Statistics Integrated Information System (SCVRSIIS),

Carolina Health Electronic Surveillance System (CHESS) and Client Automated Record and Encounter System (CARES).

Objective 5-B-6: Improve the analysis and dissemination of health disparities data.

Strategic Goal 5-C: Ensure customer focus and cultural competence in the agency.

Objective 5-C-1: Develop a standard set of agency criteria for creating customer-focused programs which: 1) identifies key customers, their expectations and requirements; 2) creates structured feedback mechanisms; and 3) allows feedback to be used to improve programs.

Objective 5-C-2: Assure that culturally and linguistically appropriate service policies and procedures are a part of each deputy area operational plan.

Objective 5-C-3: Evaluate and improve the effectiveness of the agency's cultural competency efforts.

Strategic Goal 5-D: Improve the linkage between funding and agency strategic direction.

Objective 5-D-1: Evaluate and develop activity-based cost accounting systems that provide unit cost information on major agency functions.

Objective 5-D-2: Implement improved budgeting processes to allow for better management of agency operations.

Strategic Goal 5-E: Improve operational efficiencies through the use of improved technology and facilities.

Objective 5-E-1: Increase the percent of staff who have access to and use appropriate information and communication technology.

Objective 5-E-2: Continue to pursue consolidation of the agency's facilities and workforce where appropriate.

Appendix 3

Process Implementation Plan

Goal	Action Step	Who	Timeframe	Resources
Develop manager sand staff 's knowledge of the Continuous Improvement Process, DHEC Strategic plan, and EQC planning process	Division wide retreat at an off-site location	Bureau leadership Division management, Office of Quality Management (OQM)	1 day	Office of Quality Management, EQC planning coordinator
Develop knowledge of staff	1. Interview managers and staff 2. Interview former supervisors 3. Review EPDPs	Director	2 months	1. Office of Quality Management 2. EQC Personnel Coordinator
Identify functions	1. Review Section and Unit flow charts 2. Interview managers and staff 3. Direct observation of activities 4. Review statutory and grant requirements	Director, Managers, Select staff, OQM	2 months	Managers and staff SC Code of Laws Applicable regulations Grant applications and reports
Establish Division mission, vision and values and goals	Strategic Planning workshops with managers, staff, and partners	OQM, EQC Personnel Coordinator, EQC Planning Coordinator	2 months	DHEC and EQC Planning documents
Subsystems Analysis	1. Functions integration analysis 2. Review positions associated with functions 3. Identifying Division customers 4. Comparison analysis 5. Identifying the Divisions cultures and subcultures 4. Focus group meetings with facilitator	Director Managers Staff Internal and External Bureau staff Facilitator Office of Quality Management	2-3 months	Flow charts, interview notes, observation notes, focus group notes, Force field analyses
Change Implementation	1. Develop proposed organizational designs 2. Force field analysis of driving/restraining forces 3. Develop strategies for change integration 4. Match people with positions.	Bureau leadership Director Managers, Staff, OQM	3 months	